

City of *Elgin*

*P.O. Box 128
Elgin, Oregon 97827
180 N. 8th
voice/fax 541 437-2253
elgin1@eoni.com*

August 25, 2004

Charmagne Kloepping
P.O. Box 112
Elgin, OR 97827

Dear Charmagne,

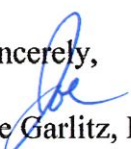
I regret to inform you that your Petition of Candidacy for Councilor can not be certified. Your length of residency in Elgin must be 12 months prior to the election date of November 2, 2004. Since you moved to Elgin in March of 2003, you will not meet this residency requirement.

I deeply regret my oversight of this requirement and offer you my sincere apology. Thank you for your willingness to serve our community. There are a number of ways in which you can serve the people of Elgin and I encourage you to attend the City Council meetings.

It is not uncommon to have Councilors resign during their term. Such vacancies are filled by appointment of the City Council. If such an opportunity arises, please offer yourself as a candidate.

Again I am sorry for my oversight of this requirement.

Sincerely,


Joe Garlitz, Recorder/Administrator

RECEIVED 7-28-04 3:40 PM

AUG 1 2004

FILING OF CANDIDACY FOR NONPARTISAN NOMINATION

PLEASE TYPE OR LEGIBLY PRINT IN BLACK INK.

NOTE: This information is a matter of public record and may be published or reproduced.

At _____ O'clock _____ M
B. Nellie Bogue Hibbert, Clerk
By _____ Dep't

☐ INCUMBENT FOR OFFICE OF JUDGE		FILING FOR OFFICE OF <u>City Councilor</u>
NAME OF CANDIDATE <u>CHARMAHNE M KLEPPING</u>		DISTRICT, DEPARTMENT OR POSITION NUMBER <u>At Large</u>
NAME SHOULD APPEAR ON BALLOT AS FOLLOWS <u>CHARMAHNE PATTEE-KLEPPING</u>		RESIDENCE ADDRESS (STREET/ROUTE, CITY, STATE, ZIP CODE) <u>1605 ADELE TERRACE ELGIN OR 97827</u>
TELEPHONE (HOME) <u>541-437-3810</u>	TELEPHONE (WORK) <u>NONE</u>	COUNTY OF RESIDENCE <u>Union</u>
FAX <u>541-437-3810</u>	EMAIL <u>froggercamp78@yahoo.com</u>	MAILING ADDRESS WHERE ALL CORRESPONDENCE WILL BE SENT <u>PO BOX 112 ELGIN OR 97827</u>
WEBSITE <u>NONE</u>		
☐ SECRETARY OF STATE OF OREGON	☐ COUNTY ELECTIONS OFFICIAL OF _____ COUNTY	☒ CITY RECORDER (AUDITOR), CITY OF <u>ELGIN</u>

☐ FILING OF CANDIDACY BY DECLARATION, WITH THE REQUIRED FILING FEE (ORS 249.056):

FILING FEES

FILING OF CANDIDACY BY DECLARATION
(ORS 249.056)STATE VOTERS' PAMPHLET
(ORS 251.095)

OFFICE

STATEWIDE OFFICES	\$100	\$1000
CIRCUIT COURT JUDGE	\$ 50	\$ 300
DISTRICT ATTORNEY	\$ 50	\$ 300
COUNTY JUDGE	\$ 50	\$ 300
MSD EXECUTIVE OFFICER, MSD AUDITOR	\$100	\$ 300
MSD COUNCILOR	\$ 25	\$ 300
COUNTY OFFICE	\$ 50	\$ 300
CITY OFFICE	*	**\$ 300
JUSTICE OF THE PEACE	NONE	N/A

* Set By Charter or Ordinance

** For Cities With a Population of 50,000 or More (ORS 251.005)

*Established
Residency in
March 2003
Not eligible for election
JG*

☒ Filing of candidacy by **PROSPECTIVE** petition, with the required proposed signature sheet signed by the candidate (SEL 121) and statement one or more circulators will or will not be paid (SEL 300) (ORS 249.020).

☐ Filing of candidacy by **COMPLETED** petition, with the required signature sheets properly certified by the appropriate county elections officials (ORS 249.020, 249.064).

Primary Election

2004 FILING DATES

General Election

~~Filing For Candidacy: First Day March 31, 2003
Filing For Candidacy: Last Day March 9, 2004
Deadline to Withdraw Candidacy: March 12, 2004
Filing For State Voters' Pamphlet: March 11, 2004~~

Filing For Candidacy: First Day September 15, 2003
Filing For Candidacy: Last Day August 24, 2004
Deadline to Withdraw Candidacy: August 27, 2004
Filing For State Voters' Pamphlet: August 24, 2004

FOR OFFICE USE ONLY

INITIALS SH

CASH OR CHECK NUMBER _____

RECEIPT NUMBER _____

CANDIDATE ID NUMBER 22774

OFFICE NUMBER _____

PRINCIPAL CAMPAIGN COMMITTEE ID # _____

REQUIRED INFORMATION

OCCUPATION (PRESENT EMPLOYMENT - PAID OR UNPAID)

NONE

OCCUPATIONAL BACKGROUND (PREVIOUS EMPLOYMENT - PAID OR UNPAID)

CONSTRUCTION
ACCOUNTING

EDUCATIONAL BACKGROUND (SCHOOLS ATTENDED, use attachment if needed)

Complete name of school - <u>no acronyms</u>	Last grade level completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc.)	Course of study (optional)
ELGIN HIGH SCHOOL	12	DIPLOMA	GENERAL
HEALD COLLEGE	142	EARNING	ACCOUNTING

Other:

PRIOR GOVERNMENTAL EXPERIENCE (ELECTED OR APPOINTED)

NONE

NOTE: This information is a matter of public record and may be published or reproduced.

By signing this document, I hereby state:

THAT I accept the nomination for the office indicated above;

THAT I shall qualify for said office if elected; and

THAT all information provided by me on this form, including my occupation, educational and occupational background, and prior governmental experience, is true to the best of my knowledge.

Charmagne H. Stepping
Candidate's signature

July 17, 2004
Date signed

WARNING: Supplying false information on this form may result in conviction of a felony with a fine of up to \$100,000 and/or prison for up to five years. (ORS 260.715).

No person shall file a nominating petition or declaration of candidacy for more than one lucrative office before the date of the primary election, unless the person first files a written withdrawal with the officer who accepted the filing (ORS 249.013(2)).

PETITION FOR NONPARTISAN NOMINATION SIGNATURE SHEET

PETITION I.D. _____

ONE OR MORE
 (CIRCLE ONE)
 NO
 PETITION CIRCULATORS
 WILL BE PAID

CANDIDATE'S NAME
CHARLOTTE M PATTEE-KLOEPPING
 OFFICE

DISTRICT, POSITION, DEPARTMENT OR ZONE NUMBER (IF APPLICABLE)
At Large

THIS IS A CANDIDATE NOMINATING
 PETITION. SIGNERS OF THIS PAGE
 MUST BE ACTIVE REGISTERED
 VOTERS IN
Union
 COUNTY ONLY.

TO THE SECRETARY OF STATE/
 COUNTY ELECTIONS OFFICIAL/
 CITY RECORDER:

We, the undersigned voters, request the candidate's name printed above, for nomination to the office indicated, be placed upon the
 appropriate ballot following the filing of this petition.

SIGNATURE	DATE SIGNED MO/DAY/YR	PRINT NAME	RESIDENCE ADDRESS STREET AND NUMBER	CITY AND ZIP CODE
1. <u>Patricia J. Burt</u>	7-17-04	<u>Patricia J. Burt</u>	<u>1605 ADELE TERRACE</u>	<u>ELGIN 97827</u>
2. <u>Donna J. Burt</u>	7-17-04	<u>Donna J. Burt</u>	<u>1605 ADELE TERRACE</u>	<u>ELGIN 97827</u>
3. <u>Donna J. Burt</u>	7-17-04	<u>Donna J. Burt</u>	<u>70 Box 43 193 S 8th</u>	<u>ELGIN 97827</u>
4. <u>Donna J. Burt</u>	7-17-04	<u>Donna J. Burt</u>	<u>1220 Division</u>	<u>Elgin 97827</u>
5. <u>Donna J. Burt</u>	7-17-04	<u>Donna J. Burt</u>	<u>1260 Division</u>	<u>Elgin 97827</u>
6. <u>Donna J. Burt</u>	7-17-04	<u>Donna J. Burt</u>	<u>1935 S. 8th P.O. Box 43</u>	<u>Elgin 97827</u>
7. <u>Donna J. Burt</u>	7-17-04	<u>Donna J. Burt</u>	<u>1094 GALESTON</u>	<u>Elgin 97827</u>
8. <u>Donna J. Burt</u>	7-17-04	<u>Donna J. Burt</u>	<u>750 N. 12th</u>	<u>Elgin 97827</u>
9. <u>Donna J. Burt</u>	7-17-04	<u>Donna J. Burt</u>	<u>750 N. 12th</u>	<u>Elgin 97827</u>
10. <u>Donna J. Burt</u>	7-17-04	<u>Donna J. Burt</u>	<u>1105 ADELE</u>	<u>Elgin 97827</u>

CIRCULATOR'S CERTIFICATION

I hereby certify every person who signed this sheet did so in my presence and I believe each person is a
 qualified voter in the State of Oregon (ORS 249.061). Warning: Falsely signing this statement may result in conviction
 of a felony with a fine of up to \$100,000 and/or prison for up to five years. (ORS 260.715).

THIS CERTIFICATION MUST BE
 SIGNED BY THE CIRCULATOR.

SHEET NUMBER 1

CIRCULATOR SIGNATURE Charlotte M Pattee-Kloepping DATE SIGNED July 17, 2004
 PRINTED NAME OF CIRCULATOR CHARLOTTE M PATTEE-KLOEPPING
 CIRCULATOR'S ADDRESS (street, city and zip code) 1605 ADELE TERRACE, ELGIN 97827

I hereby certify 9 signatures on this petition are those of active registered voters in Union County, Oregon
 SIGNATURE OF Charlotte M Pattee-Kloepping DATE CERTIFIED 8/12/04
 COUNTY/CITY ELECTION OFFICIAL

NOTE TO CANDIDATE: Petition signatures must be verified before the petition can be filed with the filing officer.
 Be sure you submit your petition in ample time for this process to be completed before 5:00 p.m. on the filing deadline day.

STATEMENT NO PETITION CIRCULATORS WILL BE PAID

I/We hereby declare no petition circulator will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition or certificate. I/We understand the filing officer must be notified not later than the tenth day after I/we first have knowledge or should have had knowledge that one or more petition circulators will be paid for obtaining signatures.

CHARMAGNE M PATTEE-KLOEPPING

Identify Petition

(Name of Candidate or Minor Political Party on Prospective Petition; or
Name of Officeholder on Recall Petition)

Signed*

Charmagne M Pattee-Klopping

Date signed

11.17.04

Date signed

Date signed

*Statement must be signed by one of the following:

- candidate for nomination;
- chief petitioner for recall petition;
- chief sponsor for certificate of nomination; or
- chief sponsor for minor political party formation petition.

PETITION FOR NONPARTISAN NOMINATION SIGNATURE SHEET

PETITION I.D. _____

ONE OR MORE
 (CIRCLE ONE) NO
 PETITION CIRCULATORS
 WILL BE PAID

CANDIDATE'S NAME
CHRISTIANE M PATTEE-KLEPPING
 OFFICE

DISTRICT, POSITION, DEPARTMENT OR ZONE NUMBER (IF APPLICABLE)

AT LARGE

THIS IS A CANDIDATE NOMINATING
 PETITION. SIGNERS OF THIS PAGE
 MUST BE ACTIVE REGISTERED
 VOTERS IN
 COUNTY ONLY. Union

TO THE SECRETARY OF STATE/
 COUNTY ELECTIONS OFFICIAL/
 CITY RECORDER:

We, the undersigned voters, request the candidate's name printed above, for nomination to the office indicated, be placed upon the
 appropriate ballot following the filing of this petition.

SIGNATURE	DATE SIGNED MO/DAY/YR	PRINT NAME	RESIDENCE ADDRESS STREET AND NUMBER	CITY AND ZIP CODE
1. <u>Mavis T. Kung-</u>	<u>7-17-04</u>	<u>MARVIN L. KUNZ</u>	<u>1105 AIDER</u>	<u>ELGIN 97827</u>
2. <u>Robert A. Scott</u>	<u>7-17-04</u>	<u>Rebecca A Scott</u>	<u>695 Alder</u>	<u>97827 Elgin</u>
3. <u>Howard J. McDonald</u>	<u>7/17/04</u>	<u>HOWARD M. McDONALD</u>	<u>635 Birch St</u>	<u>ELGIN 97827</u>
4. <u>John A. Hatcher</u>	<u>7-17/04</u>	<u>BOB S. HATCHER</u>	<u>67617 M. Hatcher Ln</u>	<u>Elgin</u>
5. <u>Theresa J. Williams</u>	<u>7-17-04</u>	<u>TERESA J. WILLIAMS</u>	<u>67617 M. Hatcher Ln.</u>	<u>Elgin, OR</u>
6. <u>Monique Williams</u>	<u>7-17-04</u>	<u>Monique M. Williams</u>	<u>67617 M. Hatcher Ln.</u>	<u>Elgin, OR</u>
7. <u>Beverly M. Gordon</u>	<u>7-17-04</u>	<u>Beverly M. Gordon</u>	<u>588 N 8th</u>	<u>Elgin OR 97827</u>
8. <u>Jessie M. McDonald</u>	<u>7/17/04</u>	<u>JESSIE M. McDONALD</u>	<u>635 Birch</u>	<u>Elgin, OR 97827</u>
9. <u>Joe Gault</u>	<u>7-17-04</u>	<u>JOSEPH GARRITT</u>	<u>1155 Hartford</u>	<u>Elgin, OR</u>
10. <u>Joanne Collier</u>	<u>7/17/04</u>	<u>Joanne Collier</u>	<u>880 North 11th</u>	<u>Elgin, OR</u>

CIRCULATOR'S CERTIFICATION

I hereby certify every person who signed this sheet did so in my presence and I believe each person is a
 qualified voter in the State of Oregon (ORS 249.061). Warning: Falsely signing this statement may result in conviction
 of a felony with a fine of up to \$100,000 and/or prison for up to five years. (ORS 260.715).

THIS CERTIFICATION MUST BE
 SIGNED BY THE CIRCULATOR.

SHEET NUMBER 2

PRINTED NAME OF CIRCULATOR Charmagne Foster-Klepping DATE SIGNED July 17, 2004
 CIRCULATOR'S ADDRESS (street, city and zip code) 1425 ADELE TERRACE ELGIN 97827

I hereby certify 10 signatures on this petition are those of active registered voters in Union County, Oregon
 SIGNATURE OF COUNTY/CITY ELECTION OFFICIAL Charmagne Foster-Klepping DATE CERTIFIED 8/12/04

NOTE TO CANDIDATE: Petition signatures must be verified before the petition can be filed with the filing officer.
 Be sure you submit your petition in ample time for this process to be completed before 5:00 p.m. on the filing deadline day.

STATEMENT NO PETITION CIRCULATORS WILL BE PAID

I/We hereby declare no petition circulator will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition or certificate. I/We understand the filing officer must be notified not later than the tenth day after I/we first have knowledge or should have had knowledge that one or more petition circulators will be paid for obtaining signatures.

CHARMAGNE M PATTEE-KLEPPING

Identify Petition

(Name of Candidate or Minor Political Party on Prospective Petition; or
Name of Officeholder on Recall Petition)

Signed* Charmagne M Pattee-Klepping

Date signed 7.17.04

Date signed

Date signed

*Statement must be signed by one of the following:

- candidate for nomination;
- chief petitioner for recall petition;
- chief sponsor for certificate of nomination; or
- chief sponsor for minor political party formation petition.

PETITION FOR NONPARTISAN NOMINATION SIGNATURE SHEET

PETITION I.D. _____

ONE OR MORE
 (CIRCLE ONE) **NO**
 PETITION CIRCULATORS
 WILL BE PAID

CANDIDATE'S NAME
CHRISTOPHER M. PATTEE - KEEPPING

DISTRICT, POSITION, DEPARTMENT OR ZONE NUMBER (IF APPLICABLE)

AT LARGE

THIS IS A CANDIDATE NOMINATING
 PETITION. SIGNERS OF THIS PAGE
 MUST BE ACTIVE REGISTERED
 VOTERS IN
Union
 COUNTY ONLY.

TO THE SECRETARY OF STATE / We, the undersigned voters, request the candidate's name printed above, for nomination to the office indicated, be placed upon the
 COUNTY ELECTIONS OFFICIAL / appropriate ballot following the filing of this petition.
 CITY RECORDER:

SIGNATURE	DATE SIGNED MO/DAY/YR	PRINT NAME	RESIDENCE ADDRESS STREET AND NUMBER	CITY AND ZIP CODE
<i>Kevin Collins</i>	7-17-04	Kevin Collins	880 N 11th	Elgin 97827
<i>Patricia Williams</i>	7-17-04	Patricia Williams	870 N 15th Ave #10	Elgin 97827
<i>Patricia M. Holcomb</i>	7-17-04	Patricia M. Holcomb	870 N 15th Ave #9	Elgin 97827
<i>Susan E. Mermurdo</i>	7-17-04	Susan E. Mermurdo	885 No. 13th Ave.	Elgin 97827
<i>Stephen Kussman</i>	7/17/04	Stephen Kussman	1405 Avenue Terrace	Elgin 97827
<i>Rachelle Williams</i>	7/19/04	Rachelle Williams	11001 Cardyn Terrace #24	Elgin 97827
<i>Corrin D. Hagoner</i>	7-19-04	Corrin D. Hagoner	604 N 15th Street	Elgin 97827
<i>Joy Ann Waters</i>	7-19-04	Joy Ann Waters	1360 Carolyn Lane	Elgin 97827
<i>Sheree Evans</i>	7-19-04	Sheree Evans	71040 Hwy 82	Elgin 97827
<i>Kathleen Byrd</i>	7-19-04	Kathleen Byrd	1711 Birch	Elgin 97827

CIRCULATOR'S CERTIFICATION

I hereby certify every person who signed this sheet did so in my presence and I believe each person is a
 qualified voter in the State of Oregon (ORS 249.061). Warning: Falsely signing this statement may result in conviction
 of a felony with a fine of up to \$100,000 and/or prison for up to five years. (ORS 260.715).

THIS CERTIFICATION MUST BE
 SIGNED BY THE CIRCULATOR.

SHEET NUMBER **3**

CIRCULATOR SIGNATURE *Christopher M. Pattee - Keeping* DATE SIGNED *July 19, 2004*
 PRINTED NAME OF CIRCULATOR **CHRISTOPHER M. PATTEE - KEEPPING**
 CIRCULATOR'S ADDRESS (street, city and zip code) **11005 AVE 15 TERRACE, ELGIN OR 97827**

I hereby certify **9** signatures on this petition are those of active registered voters in **Union** County, Oregon
 SIGNATURE OF *Shawna Johnson, Deputy*
 COUNTY/CITY ELECTION OFFICIAL DATE CERTIFIED **8/12/04**

NOTE TO CANDIDATE: Petition signatures must be verified before the petition can be filed with the filing officer.
 Be sure you submit your petition in ample time for this process to be completed before 5:00 p.m. on the filing deadline day.

STATEMENT NO PETITION CIRCULATORS WILL BE PAID

I/We hereby declare no petition circulator will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition or certificate. I/We understand the filing officer must be notified not later than the tenth day after I/we first have knowledge or should have had knowledge that one or more petition circulators will be paid for obtaining signatures.

CHARLAINE M PATTEE-KLOEPPING
Identify Petition

(Name of Candidate or Minor Political Party on Prospective Petition; or
Name of Officeholder on Recall Petition)

Signed* Charla M Pattee-Klopping

Date signed 7.17.04

Date signed _____

Date signed _____

*Statement must be signed by one of the following:

- candidate for nomination;
- chief petitioner for recall petition;
- chief sponsor for certificate of nomination; or
- chief sponsor for minor political party formation petition.

PETITION FOR NONPARTISAN NOMINATION SIGNATURE SHEET

PETITION I.D. _____

ONE OR MORE
 (CIRCLE ONE) NO
 PETITION CIRCULATORS
 WILL BE PAID

CANDIDATE'S NAME

CHARLADE W PATTEE - VICEPRID

DISTRICT, POSITION, DEPARTMENT OR ZONE NUMBER (IF APPLICABLE)

AT LARGE

THIS IS A CANDIDATE NOMINATING
 PETITION. SIGNERS OF THIS PAGE
 MUST BE ACTIVE REGISTERED
 VOTERS IN
 COUNTY ONLY. Union

TO THE SECRETARY OF STATE/
 COUNTY ELECTIONS OFFICIAL/
 CITY RECORDER:

We, the undersigned voters, request the candidate's name printed above, for nomination to the office indicated, be placed upon the
 appropriate ballot following the filing of this petition.

SIGNATURE	DATE SIGNED MO/DAY/YR	PRINT NAME	RESIDENCE ADDRESS STREET AND NUMBER	CITY AND ZIP CODE
1. <u>Robbyn Ludwig</u>	<u>7-19-04</u>	<u>Robbyn Ludwig</u>	<u>1101 Evanston</u>	<u>Elgin 97827</u>
2. <u>Lucy Waggoner</u>	<u>7-19-04</u>	<u>Lucy Waggoner</u>	<u>604 N. 15th Street</u>	<u>Elgin 97827</u>
3. <u>Chuck Horn</u>	<u>7-19-04</u>	<u>Chuck Horn</u>	<u>604 N. 15th Street</u>	<u>Elgin 97827</u>
4. <u>Kenny Stewart</u>	<u>7/27/04</u>	<u>Kenny Stewart</u>	<u>1220 Birch St.</u>	<u>Elgin 97827</u>
5. <u>Tanya Roberts</u>	<u>7/28/04</u>	<u>Tanya Roberts</u>	<u>19490 Baltimore</u>	<u>Elgin 97827</u>
6. _____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____
9. _____	_____	_____	_____	_____
10. _____	_____	_____	_____	_____

CIRCULATORS CERTIFICATION

THIS CERTIFICATION MUST BE SIGNED BY THE CIRCULATOR.

SHEET NUMBER 4

I hereby certify every person who signed this sheet did so in my presence and I believe each person is a
 qualified voter in the State of Oregon (ORS 249.061). Warning: Falsely signing this statement may result in conviction
 of a felony with a fine of up to \$100,000 and/or prison for up to five years (ORS 260.715).
 CIRCULATOR SIGNATURE Charla W Pattee DATE SIGNED 7.28.04
 PRINTED NAME OF CIRCULATOR CHARLADE W PATTEE - VICEPRID
 CIRCULATOR'S ADDRESS (street, city and zip code) 1465 ADEL TERRACE ELGIN OR 97827

I hereby certify 5 signatures on this petition are those of active registered voters in Union County, Oregon
 SIGNATURE OF COUNTY/CITY ELECTION OFFICIAL David A Johnson, deputy DATE CERTIFIED 8/2/04

NOTE TO CANDIDATE: Petition signatures must be verified before the petition can be filed with the filing officer.
 Be sure you submit your petition in ample time for this process to be completed before 5:00 p.m. on the filing deadline day.

STATEMENT NO PETITION CIRCULATORS WILL BE PAID

I/We hereby declare no petition circulator will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition or certificate. I/We understand the filing officer must be notified not later than the tenth day after I/we first have knowledge or should have had knowledge that one or more petition circulators will be paid for obtaining signatures.

CHARMAYNE M PATTEE-KLOPPING

Identify Petition

(Name of Candidate or Minor Political Party on Prospective Petition; or
Name of Officeholder on Recall Petition)

Signed*

Charmayne M Pattee-Klopping

Date signed

7.17.04

Date signed

Date signed

*Statement must be signed by one of the following:

- candidate for nomination;
- chief petitioner for recall petition;
- chief sponsor for certificate of nomination; or
- chief sponsor for minor political party formation petition.